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APPLICANTS

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** CONTINUING DATA ***** *none* *AMM*

** FOREIGN APPLICATIONS ***** *none* *AMM*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/15/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>	STATE OR COUNTRY TX	SHEETS DRAWING 1	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 1
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Verified and Acknowledged
 Examiner's Signature *AMM* Initials

ADDRESS
 21917
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TITLE
 Active-over-passive coordinated motion winch

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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